	ill in this inform	nation to ide	entify your case:			_	08/	29/16 15:10:21	Desc Main
		_	R.	Murr	ay, III	.go <u>-</u>			
	Debtor 1	Ira First Name	Middle Name	Last N			— Che	eck if this is:	
	Debtor 2	First Name	Middle News	Look N			— M	An amended filing	
	(Spouse, if filing)	First Name	Middle Name	Last N				A supplement showing	post-petition
	United States Bankr Case number	uptcy Court for 15-17242AI		SI. OF PEN	NSYLV/	ANIA	-	chapter 13 income as o	of the following date:
	(if known)	15-172-271	WIO 13					MM / DD / YYYY	_
<u></u>	fficial Form B	el.						WWW, 25 / 1111	
	fficial Form B chedule I: Yo		2						12/13
res inc abo you	sponsible for supply lude information al out your spouse. If ur name and case n	ving correct in bout your spot more space is	formation. If you are use. If you are separ s needed, attach a se wn). Answer every c	married and ated and you parate sheet	not filing r spouse	j jointly is not	y, and your filing with y	d Debtor 2), both are eq spouse is living with yo you, do not include info any additional pages, v	ou, rmation
1.	Fill in your emplo								
	information. If you have more the	han one		Debtor 1				Debtor 2 or non-filin	g spouse
	job, attach a separa	ate page E	Employment status	✓ Employed				Employed	
	with information at additional employe	ers.		☐ Not em	pioyea			■ Not employed	
	Include part-time,		Occupation	Clerk				_	
	or self-employed w		mployer's name	Marriott H	otel				
	Occupation may in	iclude E	Employer's address						
	student or homemapplies.	aker, if it		Number Stre	et			Number Street	
	αρρσο.								
				Bethesda		MD	20817		
				City		State	Zip Code	City	State Zip Code
		н	low long employed t	nere? <u>21</u>	Years				
	Oivo D	etaila Abau	4 Manthly Income	_					
			t Monthly Incom						lude
	timate monthly inco n-filing spouse unles			i. if you nave	nothing t	o repor	t for any line	e, write \$0 in the space. I	nciude your
-		•	nore than one employete sheet to this form.	er, combine th	e informa	tion for	all employe	ers for that person on the	lines below. If
,	spass, c	andon a dopard				For D	Debtor 1	For Debtor 2 or non-filing spouse	_
2.			ry, and commissions onthly, calculate what		2. ⁄age		\$1,950.00		
3.	Estimate and list	monthly overt	ime pay.		3.	+	\$0.00		
4.	Calculate gross in	ncome. Add li	ne 2 + line 3.		4.		\$1,950.00		

Document Page 2 of 3 For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$1,950.00 List all payroll deductions: \$650.00 5a. Tax, Medicare, and Social Security deductions 5a \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. 5f. **Domestic support obligations** 5f. \$0.00 5g. \$0.00 5g. Union dues 5h. Other deductions. 5h. + \$0.00 Specify: 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 6. \$650.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. \$1,300.00 List all other income regularly received: 8a. 8a. Net income from rental property and from operating a \$800.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 Social Security 8e. \$0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. 8h. 👍 Specify: See continuation sheet \$1,590.00 **Add all other income.** Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$2,390.00 Calculate monthly income. Add line 7 + line 9. \$3,690.00 \$3,690.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$3,690.00 income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Combined Related Data, if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. Debtor expects to rent 5146 Samson Street for \$425/months Yes. Explain:

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Middle Name

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IGase 15-17242-**a**mc

First Name

8h.	Other Monthly Income (details)	For Debtor 1 For Debtor 2 or non-filing spouse
U	Tips	\$1,500.00
	Estimated Prorated IRS Refund	\$90.00
		Totals: \$1.590.00

Debtor 1 **IG**ase 15-17242-**a**mc Doc 40

Middle Name

First Name

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 Descendent
 Page 3 of 3

Official Form B 6l Schedule I: Your Income page 3